

October 19, 2011

CERTIFIED MAIL
(#7008 1300 0000 7195 8670)

Adene Jacobs
A Special Place Adult Family Home
2247 NW Cascade Street
Camas, WA 98607

License # 666000

IMPOSITION OF CONDITIONS ON A LICENSE

Dear Ms. Jacobs:

This letter constitutes formal notice of the imposition of conditions on the license for your adult family home, located at **2247 NW Cascade Street, Camas, Washington**, by the State of Washington, Department of Social and Health Services. This action is taken under the authority granted in RCW 70.128.160, chapter 43.20A RCW and 388-76-10940.

The conditions are based on violations of the Revised Code of Washington (RCW) and Washington Administrative Code (WAC) regulations found by the department at your adult family home. These and other deficiencies are more fully described in the attached Statement of Deficiencies report completed by the department on October 6, 2011.

WAC 388-76-10400 (3)(a-c) Care and services.

The licensee failed to provide care and services that promoted individual needs and quality of life for one resident, when the provider complained to the resident about helping the resident at night with incontinent care and made her wait up to 30 minutes to receive incontinent care.

The department has determined that the following conditions shall be placed on your adult family home license:

- *The licensee will ensure the home has an awake caregiver at the home throughout the night to ensure all residents get required care through the night. This condition will remain in effect as long as there are resident in the home requiring night time care, or until the provider develops an alternative plan, review and accepted by the department.*

- ***Licensee must post the license with the enclosed Notice of Conditions of Operation in the adult family home in a location accessible to residents and visitors.***

The effective date of the conditions on your license is October 19, 2011. As provided in RCW 70.128.160(4), WAC 388-76-10990 (7), the effective date of the conditions on your license will not be postponed pending an administrative hearing or informal dispute resolution review.

You may contest the conditions on your license by requesting an administrative hearing. The Office of Administrative Hearings must receive your written request for a hearing within twenty-eight (28) calendar days following your receipt of this letter. A copy of this letter and a copy of the enclosed Statement of Deficiencies must be included with your request. Send your request to:

**Office of Administrative Hearings
PO Box 42489
Olympia, Washington 98504-2489**

As provided in RCW 70.128, you may request an informal dispute resolution review of enforcement actions initiated in response to a Statement of Deficiencies report. During the informal dispute resolution process you also have the right to present written evidence refuting this action. A request for informal dispute resolution review will not change the deadline for you to request an administrative hearing. Informal dispute resolution review by the department is not binding in an administrative hearing.

To request an informal dispute resolution review, send your written request to:

**Informal Dispute Resolution Program Manager
Aging and Disability Services Administration
PO Box 45600
Olympia, Washington 98504-5600
Fax (360) 725-3225**

The written request should:

- Identify the enforcement action that is disputed;
- Explain why you are disputing the action;
- Indicate the type of dispute resolution process you prefer (direct meeting, telephone conference or documentation review); and
- Be sent within 10 working days of your receipt of this notice.

Plan
(Plan of Correction)

You Must:

Return the plan, on the enclosed report, within 10 calendar days after you receive this letter.

Include the following in your plan for each deficiency:

- The date you have or will correct each deficiency; and
- Provide a signature and date certifying that you have or will take corrective measures to correct each cited deficiency.

Send your plan to:

Dahl Kim, Field Manager
5411 E. Mill Plain Blvd., Suite 25
Vancouver, WA 98661

If you have any questions, please contact Dahl Kim, Field Manager at (360) 725-2255.

Sincerely,

Lori Melchiori, Ph.D.
Assistant Director
Residential Care Services

Enclosure

cc: Robert Ogolsky, Adult Family Home Compliance Specialist
Field Manager, Region 3, Unit D
RCS District Administrator, Region 3
HCS Regional Administrator, Region 3
DDD Regional Administrator, Region 3
Karen Dinan, Assistant Attorney General
WA LTC Ombudsman
Area Agency on Aging, AAA - SW
Medicaid Fraud Control Unit
John Ficker, HCS